Congress of the United States House of Representatives Washington, DC 20515-0603

October 27, 2021

Mrs. Chiquita Brooks-LaSure Administrator Center for Medicare and Medicaid Services 200 Independence Ave SW Suite 314 G Washington, DC 20201

Dear Administrator Brooks-LaSure,

We write in response to your October 12, 2021, announcement that the Centers for Medicare & Medicaid Services (CMS) has approved Colorado's proposal to "provide gender-affirming care in the individual and small group health insurance markets." We strongly oppose these proposed actions and urge you to immediately withdraw CMS's approval.

Essential Health Benefits are defined by Section 1302(b)(1) of 42 U.S.C. 18022 and require individually purchased health insurance plans in small-group markets to cover a minimum federal standard of care. The decision to require gender-affirming care as an extension of mental health benefits is a blatant misinterpretation of the statute. There is little evidence that the treatment approved by CMS improves mental health and we should not be placing new private sector mandates on insurance companies to serve progressive priorities over science.

In the press release announcing this decision, you stated, "To truly break down barriers to care, we must expand access to the full scope of health care, including gender-affirming surgery and other treatments, for people who rely on coverage through Medicare, Medicaid & CHIP and the Marketplaces." Mandating coverage of unproven, experimental gender-affirming care for children covered under the Children's Health Insurance Program is inappropriate and a misuse of taxpayer dollars. Additionally, there is evidence that gender-affirming care, like puberty blockers, causes children to face more mental health struggles and long-term consequences.¹

Furthermore, this decision infringes upon the conscience rights of small, private health insurance companies by forcing them to comply with this government mandate. The Colorado proposal includes no religious exemptions for insurance companies that have moral objections to carrying out these policies. As we have seen in recent Supreme Court rulings, forcing private companies to act against their sincerely held religious beliefs is unconstitutional.

¹ NCA - Gender Dysphoria and Gender Reassignment Surgery (CAG-00446N) - Decision Memo (cms.gov)

Gender-affirming care like puberty-blockers and gender affirming surgeries are not essential healthcare. Scientific evidence makes clear that this experimental care is far more dangerous than helpful for mental health and suicide prevention, especially for children.² By requiring coverage of these procedures under the guise of mental healthcare, CMS is prioritizing a radical progressive agenda over medical facts, the religious liberty of small health insurance companies, and existing federal statute. We strongly urge you to consider the consequences of this decision and urge you to withdraw the CMS approval. We appreciate your attention to this pressing matter.

Sincerely,

Lauren Boebert Member of Congress

Member of Congress

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Doug Lamborn Member of Congress

Doug Lambon

² Zucker, Kenneth. (2019). Adolescents with Gender Dysphoria: Reflections on Some Contemporary Clinical and Research Issues. Archives of Sexual Behavior. 48. 10.1007/s10508-019-01518-8.